Median annual earnings of physician assistants in 1997 were \$41,100 in offices and clinics of medical doctors and \$57,100 in hospitals.

According to the American Academy of Physician Assistants, median income for physician assistants in full-time clinical practice in 1998 was about \$62,200; median income for first-year graduates was about \$54,000. Income varies by specialty, practice setting, geographical location, and years of experience.

Related Occupations

Other health workers who provide direct patient care that requires a similar level of skill and training include nurse practitioners, physical therapists, occupational therapists, clinical psychologists, nurse anesthetists, nurse midwives, clinical nurse specialists, speech-language pathologists, and audiologists.

Sources of Additional Information

For information on a career as a physician assistant, contact:

American Academy of Physician Assistants Information Center, 950 North Washington St., Alexandria, VA 22314-1552.

Internet: http://www.aapa.org For a list of accredited programs and a catalog of individual PA training programs, contact:

Association of Physician Assistant Programs, 950 North Washington St., Alexandria, VA 22314-1552. Internet: http://www.apap.org

For eligibility requirements and a description of the Physician Assistant National Certifying Examination, write to:

Technology Pkwy., Suite 800, Norcross, GA 30092-2913.

Internet: http://www.nccpa.net

Recreational Therapists

(O*NET 32317)

Significant Points

- Employment of recreational therapists is expected to increase, due to expansion in long-term care, physical and psychiatric rehabilitation, and services for people with disabilities.
- Opportunities should generally be best for persons with a bachelor's degree in therapeutic recreation or in recreation with a concentration in therapeutic recreation.

Nature of the Work

Recreational therapists, also referred to as therapeutic recreation specialists, provide treatment services and recreation activities to individuals with disabilities, illnesses, or other disabling conditions. These therapists use a variety of techniques to treat or maintain the physical, mental, and emotional well-being of clients. Treatments may include the use of arts and crafts, animals, sports, games, dance and movement, drama, music, and community outings. Therapists help individuals reduce depression, stress, and anxiety. They also help individuals recover basic motor functioning and reasoning abilities, build confidence, and socialize effectively to enable greater independence, as well as to reduce or eliminate the effects of illness or disability. Additionally, they help integrate people with disabilities into the community, by helping them use community resources and recreational activities. Recreational therapists should not be confused with recreation workers, who organize recreational activities primarily for enjoyment. (Recreation workers are discussed elsewhere in the *Handbook*.)



Recreational therapists help people with disabling conditions live fuller lives through activities.

In acute health care settings, such as hospitals and rehabilitation centers, recreational therapists treat and rehabilitate individuals with specific health conditions, usually in conjunction or collaboration with physicians, nurses, psychologists, social workers, and physical and occupational therapists. In long-term care facilities and residential facilities, recreational therapists use leisure activities—especially structured group programs—to improve and maintain general health and well-being. They may also treat clients and provide interventions to prevent further medical problems and secondary complications related to illness and disabilities.

Recreational therapists assess clients, based on information from standardized assessments, observations, medical records, medical staff, family, and clients themselves. They then develop and carry out therapeutic interventions consistent with client needs and interests. For example, clients isolated from others, or with limited social skills, may be encouraged to play games with others, or righthanded persons with right-side paralysis may be instructed to adapt to using their non-affected left side to throw a ball or swing a racket. Recreational therapists may instruct patients in relaxation techniques to reduce stress and tension, stretching and limbering exercises, proper body mechanics for participation in recreation activities, pacing and energy conservation techniques, and individual as well as team activities. Additionally, therapists observe and document patients' participation, reactions, and progress.

Community based therapeutic recreation specialists may work in park and recreation departments, special education programs for school districts, or programs for older adults and people with disabilities. Included in the latter group are programs and facilities such as assisted living, adult day service centers and substance abuse rehabilitation centers. In these programs, therapists use interventions to develop specific skills while providing opportunities for exercise, mental stimulation, creativity, and fun. Although most therapists are employed in other areas, those who work in schools help counselors, teachers, and parents address the special needs of students-most importantly, easing the transition into adult life for disabled students.

Working Conditions

Recreational therapists provide services in special activity rooms but also plan activities and prepare documentation in offices. When working with clients during community integration programs, they may travel locally to instruct clients on the accessibility of public transportation and other public areas, such as parks, playgrounds, swimming pools, restaurants, and theaters.

Therapists often lift and carry equipment as well as lead recreational activities. Recreational therapists generally work a 40-hour week that may include some evenings, weekends, and holidays.

Employment

Recreational therapists held about 39,000 jobs in 1998. About 38 percent of salaried jobs for therapists were in hospitals, and 26 percent were in nursing and personal care facilities. Others worked in residential facilities, community mental health centers, adult day care programs, correctional facilities, community programs for people with disabilities, and substance abuse centers. About 1 out of 3 therapists was self-employed, generally contracting with long-term care facilities or community agencies to develop and oversee programs.

Training, Other Qualifications, and Advancement

A bachelor's degree in therapeutic recreation, or in recreation with a concentration in therapeutic recreation, is the usual requirement for entry-level positions. Persons may qualify for paraprofessional positions with an associate degree in therapeutic recreation or a health care related field. An associate degree in recreational therapy; training in art, drama, or music therapy; or qualifying work experience may be sufficient for activity director positions in nursing homes.

Most employers prefer to hire candidates who are certified therapeutic recreation specialists (CTRS). The National Council for Therapeutic Recreation Certification (NCTRC) certifies therapeutic recreation specialists. To become certified, specialists must have a bachelor's degree, pass a written certification examination, and complete an internship of at least 360 hours, under the supervision of a certified therapeutic recreation specialist. A few colleges or agencies may require 600 hours of internship.

There are approximately 150 programs that prepare recreational therapists. Most offer bachelors degrees, although some offer associate, master's, or doctoral degrees. As of 1998, there were 43 recreation programs with options in therapeutic recreation accredited by the National Council on Accreditation.

Recreational therapy programs include courses in assessment, treatment and program planning, intervention design, and evaluation. Students also study human anatomy, physiology, abnormal psychology, medical and psychiatric terminology, characteristics of illnesses and disabilities, professional ethics, and the use of assistive devices and technology.

Recreational therapists should be comfortable working with persons who are ill or have disabilities. Therapists must be patient, tactful, and persuasive when working with people who have a variety of special needs. Ingenuity, a sense of humor, and imagination are needed to adapt activities to individual needs; and good physical coordination is necessary to demonstrate or participate in recreational activities.

Therapists may advance to supervisory or administrative positions. Some teach, conduct research, or perform contract consulting work.

Job Outlook

Employment of recreational therapists is expected to grow as fast as the average for all occupations through the year 2008, because of anticipated expansion in long-term care, physical and psychiatric rehabilitation, and services for people with disabilities. However, the total number of job openings will be relatively low, because the occupation is small. Opportunities should be best for persons with a bachelor's degree in therapeutic recreation or in recreation with an option in therapeutic recreation.

Health care facilities will provide a growing number of jobs in hospital-based adult day care and outpatient programs and in units offering short-term mental health and alcohol or drug abuse services. Rehabilitation, home-health care, transitional programs, and psychiatric facilities will provide additional jobs.

The rapidly growing number of older adults is expected to spur job growth for therapeutic recreation specialists and recreational therapy paraprofessionals in assisted living facilities, adult day care programs, and social service agencies. Continued growth is also expected in community residential facilities, as well as day care programs for individuals with disabilities.

Earnings

Median annual earnings of recreational therapists were \$27,760 in 1998. The middle 50 percent earned between \$21,580 and \$35,000 a year. The lowest 10 percent earned less than \$16,380 and the highest 10 percent earned more than \$42,440 a year. Median annual earnings for recreational therapists in 1997 were \$29,700 in hospitals and \$21,900 in nursing and personal care facilities.

Related Occupations

Recreational therapists primarily design activities to help people with disabilities lead more fulfilling and independent lives. Other workers who have similar jobs are recreational therapy paraprofessionals, orientation therapists for persons who are blind or have visual impairments, art therapists, drama therapists, dance therapists, music therapists, occupational therapists, physical therapists, and rehabilitation counselors.

Sources of Additional Information

For information on how to order materials describing careers and academic programs in recreational therapy, write to:

- American Therapeutic Recreation Association, 1414 Prince Street, Suite 204, Alexandria, VA 22314. Internet: http://www.atra-tr.org
- National Therapeutic Recreation Society, 22377 Belmont Ridge Rd., Ashburn, VA 20148-4501.

Internet: http://www.nrpa.org/branches/ntrs.htm

Certification information may be obtained from:

National Council for Therapeutic Recreation Certification, P.O. Box 479, Thiells, NY 10984-0479.

Registered Nurses

(O*NET 32502)

Significant Points

- The largest health care occupation, with over 2 million jobs.
- One of the 10 occupations projected to have the largest numbers of new jobs.
- Earnings are above average, particularly for advanced practice nurses who have additional education or training.

Nature of the Work

Registered nurses (R.N.s) work to promote health, prevent disease, and help patients cope with illness. They are advocates and health educators for patients, families, and communities. When providing direct patient care, they observe, assess, and record symptoms, reactions, and progress; assist physicians during treatments and examinations; administer medications; and assist in convalescence and rehabilitation. R.N.s also develop and manage nursing care plans; instruct patients and their families in proper care; and help individuals and groups take steps to improve or maintain their health. While State laws govern the tasks R.N.s may perform, it is usually the work setting, which determines their day-to-day job duties.